PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notifica	ed below or directed oth	ig the Patent, advance of herwise in Block 1, by (a	rders and notification of a) specifying a new con	of ma	ondence address; and/	or (b) indicating a sep	arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
23644 7590 12/08/2009 BARNES & THORNBURG LLP P.O. BOX 2786 CHICAGO, IL 60690-2786					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
							(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATT	ORNEY DOCKET NO.	CONFIRMATION NO.	
10/828,997 04/20/2004 David W. Caldwell 49256-109423 6796 TITLE OF INVENTION: METHOD OF MAKING AN ELECTRICAL CIRCUIT								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	JЕ	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	E DATE DUE	
nonprovisional	NO	\$1510	\$300		\$0	\$1810	03/08/2010	
EXAM	IINER	ART UNIT	CLASS-SUBCLASS					
ARBES, CARL J		3729	029-847000					
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSI	less an assignee is ident h in 37 CFR 3.11. Comp GNEE	oletion of this form is NO	data will appear on the T a substitute for filing (B) RESIDENCE: (Cl	e par an a ITY	tent. If an assignee is ssignment. and STATE OR COUN		document has been filed for	
TouchSensor Technologies, LLC Wheaton, IL Please check the appropriate assignee category or categories (will not be printed on the patent):								
Please check the appropri	riate assignee category or	categories (will not be pa	rinted on the patent):		Individual M Corpora	tion or other private gr	roup entity Government	
4a. The following fee(s) Issue Fee Publication Fee (N Advance Order -	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 120913 (enclose an extra copy of this form).							
	ns SMALL ENTITY statu	us. See 37 CFR 1.27.		_	er claiming SMALL El			
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be accepte atos Patent and Trademark	d from anyone other the c Office.	an th	e applicant; a registered	attorney or agent; or	the assignee or other party in	
Authorized Signature			Date <u>March 8, 2010</u>					
Typed or printed nam	e Mark P.	Vrla			Registration No	43,973		
an application. Confider submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 22:	tiality is governed by 35 d application form to the ions for reducing this bu Virginia 22313-1450. DC 313-1450.	CFR 1.311. The informati U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the ONOT SEND FEES OR persons are required to re	1.14. This collection is depending upon the ine Chief Information Of COMPLETED FORMS	esti ndivi fficer TO	mated to take 12 minut dual case. Any comme r, U.S. Patent and Trade THIS ADDRESS. SE	es to complete, including the son the amount of the commark Office, U.S. Department of the TO: Commissioner	nd by the USPTO to process) ing gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450, ol number.	